

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	COURT CASE NUMBER <i>CR 11/102</i>
UNITED STATES OF AMERICA	1:CV-00-1105
DEFENDANT	TYPE OF PROCESS INSTRUCTIONS TO DEBTOR/NOTICE
TAMMY R. SMITH	

SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN TAMMY R. SMITH
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 519 2ND STREET, TOWANDA, PA 18848

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

<input type="checkbox"/> CARROLL A. TERRUSO, PS U.S. ATTORNEY P.O. BOX 309 SCRANTON, PA 18501	Number of process to be served with this Form - 285	1
<input type="checkbox"/>	Number of parties to be served in this case	2
<input type="checkbox"/>	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

SSN: 235-96-1227

DOB: 10/13/62

Signature of Attorney or other Originator requesting service on behalf of: <i>Carroll A. Terruso</i>	PLAINTIFF	TELEPHONE NUMBER	DATE
CARROLL A. TERRUSO, PS	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	570-348-2800	10/24/02

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
		No. <u>67</u>	No. <u>67</u>	<i>J. Lavelle</i>	<i>10/24/02</i>

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below) *BY ITI*

Name and title of individual served (if not shown above) <i>Tammy Smith</i>	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
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Address (complete only if different than shown above) <i>Hurley Food Store 357 York Ave Towanda, PA 18848</i>	Date of Service	Time
	<i>10-30-02</i>	<i>1200 pm</i>
	Signature of U.S. Marshal or Deputy <i>Joey P. Lavelle</i>	

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or Deputy	Amount of Refund
<i>180.00</i>	<i>58.40</i>				<i>120.00</i>	

REMARKS:

1 DUSM - (10AM-2PM) 160 miles

OCT 31 2002

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	UNITED STATES OF AMERICA	COURT CASE NUMBER
		1:CV-00-1105
DEFENDANT	TAMMY R. SMITH	TYPE OF PROCESS
		WRIT OF CONTINUING GRNISHMENT

SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
→	Mr. Robert A. Hurley
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
AT	387 York Avenue, Towanda, PA 18848

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

CARROLL A. TERRUSO, PS
U.S. ATTORNEY
P.O. BOX 309
SCRANTON, PA 18501

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	2
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Signature of Attorney or other Originator requesting service on behalf of: CARROLL A. TERRUSO, PS	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	570-348-2800	10/26/02

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. 47	District to Serve No. 47	Signature of Authorized USMS Deputy or Clerk <i>J. Lavelle</i>	Date 10/24/02
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <i>Cindy Vischansky - Book keeper</i>	FILED OCT 31 2002 FBI - PHILADELPHIA	A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service 10-30-02	Time 1200 pm
	Signature of U.S. Marshal or Deputy <i>Terry J. K. J.</i>	

Service Fee 180.00	Total Mileage Charges (including endeavors) 58.40	Forwarding Fee	Total Charges	Advance Deposit 100.00	Amount owed to U.S. Marshal or 100.00	Amount of Refund
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REMARKS:

1 Day - (10AM - 2PM) 160 miles